

Canadian Food Inspection Agency / Agence canadienne d'inspection des aliments

Canadian Food Inspection Agency



Science and regulation...
working together for Canadians

INDUSTRY INFORMATION SESSION 2012

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Agenda

- Food Safety Enhancement Program (FSEP) update
- Validation of control measures
- HACCP system maintenance & reassessment
- Action plan
- CFIA verification of FSEP recognized establishments (commodities other than meat)
- Compliance Verification System (CVS) update for meat establishments
- 5 most common CVS tasks rated U
- Questions & Answers

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FSEP Update




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Food Safety Enhancement Program (FSEP)

FSEP specifies the requirements for an effective HACCP system which includes


- Prerequisite programs (PP)
- HACCP plan(s)
- Validation documentation
- HACCP system maintenance and reassessment procedures

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Prerequisite programs

Basic conditions and activities that are necessary to maintain a hygienic environment and good manufacturing practices throughout the establishment.


- A. Premises
- B. Transportation, Purchasing/Receiving/Shipping and Storage
- C. Equipment
- D. Personnel
- E. Sanitation and Pest Control
- F. Recall

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Operational Prerequisite Programs *New*

Food Safety related procedures essential in order to control the likelihood of introducing food safety hazards to and/or the contamination or proliferation of food safety hazards in the product(s) or in the processing environment.

- G. Operational Prerequisite Programs
 - G.1.1 Allergen Control Program
 - G.1.2 Food Additives and Nutrients
 - G.1.3 Food Processing Aids

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New

G.1.2 Food Additives and Nutrients

This sub-element applies to three operational activities requiring control measures.

1. The use of food additives listed in the tables in Part B, Division 16 of the Food and Drug Regulations for which a maximum level of use is identified.
2. The use of nutrients listed in Part D – Vitamins, Minerals and Amino Acids of the Food and Drug Regulations for which a minimal and maximal amount is specified in Part B of the Regulations.
3. The use of modified atmosphere packaging systems.

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New

G.1.3 Food Processing Aids

This sub-element applies to food processing aids for which maximum levels of use have been established by Health Canada.

A food processing aid is a substance that is used for a technical effect in food processing or manufacture, the use of which does not affect the intrinsic characteristics of the food and results in no or negligible residues of the substance or its by-products in or on the finished food.

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Task versus Monitoring

Task
Operational activities that are part of a prerequisite program and that are carried out by designated employees to prevent a food safety hazard.

Monitoring
The act, by company personnel of conducting a planned sequence of observations, tests or measurements to assess whether a CCP, a process control and/or a prerequisite program is under control.

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Example of Task vs Monitoring

C.1.2.1 Preventative Equipment Maintenance Program

The establishment has and implements a documented Preventative Equipment Maintenance Program which includes but is not limited to:

- A list of equipment that may impact on food safety requiring regular maintenance;
- A preventative maintenance schedule or frequency of preventative maintenance activities;
- The maintenance procedures to perform for each preventative maintenance task;
- Records to be kept to demonstrate that the preventative maintenance tasks have been completed.

The equipment maintenance program includes tasks to be performed by the maintenance employees. The program will be monitored at a frequency X to ensure that it is effectively implemented.

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Task vs Monitoring – continued

All these programs include tasks to be performed by designated employees. Monitoring activities will be conducted at a determined frequency to assess if the procedures in place are effective to prevent a hazard to occur.

- A.4.1.1 – Water safety procedures
- A.4.1.2 – Water treatment procedures
- C.1.2.1 – Preventative equipment maintenance program
- C.1.2.2 – Equipment calibration program
- D.1.1.1 – General food hygiene training program
- D.1.2.1 – Technical training program
- E.1.1.1 – Sanitation program
- E.2.1.1 – Pest control program
- Etc.

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Task vs Monitoring – continued

An establishment may want to develop more procedures or tasks to facilitate the control of a prerequisite program requirement.

Any additional procedures or tasks must be referenced within the respective prerequisite program bullet.

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FSEP – List of Modifications

Go to tab 3 – FSEP Manual list of modifications

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New HACCP plan or
New process to an existing HACCP plan

Inform CFIA Inspector prior to the
commencement of the new process

High risk category

Lower risk category

Written review by CFIA
prior to the
commencement
of new process
for commerce

Written review by CFIA
can occur after
the commencement of
new process for commerce

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High Risk Category

- The process involves a kill step to eliminate microbial contaminants, or a step to reduce them to an acceptable level. For example, pasteurization, sterilization, cooking, drying, fermentation.
- Hazards are inherent to the process and the product is considered ready to eat, without further processing by the consumer.
- The production involves a complex recipe. It may involve the use of chemical hazards (e.g. nitrates) or involve a product that addresses serious nutritional concerns.

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Lower Risk Category

- Hazards are inherent to the process but the processing controls are not designed to eliminate these hazards. Rather, the controls (such as proper sanitation and temperature control) are meant to prevent contamination or to prevent an increase to existing biological hazards. Product will be further processed by the consumer/client, who may need to follow specific handling and storage instructions.
- Products are ready to eat but do not pose significant health hazards on their own. For example, thermal processing or aseptic processing for high-acid food, maple product processing, honey processing, freezing, packaging, drying of fruits.

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New HACCP Tools Available

- Prerequisite Programs Generic Model
- Senior Management Letter of Commitment
- HACCP System Performance Reporting
- HACCP System Maintenance and Reassessment Procedures
- Validation Checklist

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Validation



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What is Validation?


Obtaining evidence that a control measure is capable of controlling a specific hazard to a specified outcome

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Under the FSEP Manual, which control measures must be validated?


Control measures related to;

- Critical control points
- Process controls
- Prerequisite programs that can lead to a food safety incident if not capable of controlling the specified standards

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When to Validate?


- At the time a control measure is designed and, whenever possible, before full implementation
- System failure
- Changes made to a control measure
- New scientific or regulatory information
 - Emergence of a previously unidentified hazard (e.g. new pathogen)
 - New information indicating that the hazard is not being controlled to the level specified (e.g. new internationally accepted analytical technologies)

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What is CFIA looking for?


Documentation to demonstrate that:

- the control measure works in theory
- the control measure works in practice


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What type of documentation does CFIA expect for Validation?

Go to tab 4 – Validation checklist

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*HACCP System
Maintenance &
Reassessment*



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HACCP System Maintenance

Continuous changes to a HACCP system to keep it up-to-date and a true reflection of the establishment's controls


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What kind of changes?

Any changes that affect the HACCP system design and implementation


For example:

- New product
- New ingredients
- New monitoring frequency
- New equipment
- New sanitation procedures
- New production areas
- New regulatory requirements

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HACCP System Maintenance Procedures


- The name or title of personnel responsible to make changes to the HACCP system
- The name or title of personnel responsible to ensure that the changes are implemented effectively
- A method to identify the revised versions
- The use of a log book or equivalent which must at least contain the following information:
 - A description of the changes
 - The signature or initials of responsible person who made the change
 - Where the changes occurred in the HACCP system
 - The dates when changes are implemented, reassessed and, if necessary, validated
 - The signature or initials of responsible person who ensure the changes are implemented effectively
 - The revision date or number that correlates with document changed

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Example of a Maintenance Procedure

Go to tab 5 – Example of a Maintenance Procedure


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HACCP System Reassessment

Assessment to ensure that the HACCP system currently in place is complete and effective


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When to Reassess?

- Whenever any changes or situations occur that could affect the hazard analysis or alter the HACCP system
- At least annually

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Annual HACCP System Reassessment
Two (2) objectives

To ensure that the HACCP system is COMPLETE

- Up-to-date
- Identifies all food safety hazards
- Has control measures in place for all food safety hazards which may be controlled by the establishment
- Conforms to current regulatory and CFIA program requirements
- Conforms to the requirements defined in the FSEP manual


To ensure that the HACCP system is EFFECTIVE

- Results in the desired outcomes

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Example of Reassessment Procedures

Go to tab 5 – Example of Reassessment Procedures

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Action Plan



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Why is CFIA asking for Action Plans?

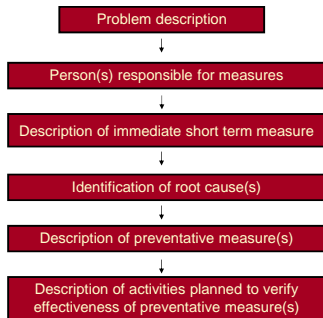
- To address non-compliance to regulatory requirements identified through inspection activities
- To have written corrective measures endorsed by representatives of Senior Management


Action plans form part of a continuous compliance process

What is the positive aspect for establishments?

- A clear and comprehensive action plan allows for
- better understanding of the non-compliance causes
 - better understanding of each person's roles and responsibilities
 - better use of resources
 - better coordination of staff involved in corrective actions
 - better resolution of problems


What is CFIA looking for?






EXAMPLE OF AN ACTION PLAN

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Situation that resulted in the CAR:

On August 15, 2011 at approximately 22:15, the inspector noted 2 skids of raw product were being tempered in Chill Room A; the room temperature was 22 °C.

The inspector spoke with QA Supervisor, who indicated the room temperature was 19 °C at 17:00 monitoring time which was within plant specification (QASOP #123 indicates room must not exceed 21 °C during tempering).


The inspector spoke with Production Supervisor, who indicated that the product was 'rock solid' so the doors will be closed going into Chill Room A and the fan will be turned on to ensure that the raw product would be ready to be used during the morning of Aug. 16.


Inspector noted that the product was completely thawed and requested that QA take a product temp.

The internal temperatures were between 5 and 6 °C at 22:30 on Aug. 15.

Operator's written program did not require documented temperature monitoring of tempered product. As such, no records were available to demonstrate that product tempered within the facility was stored in a manner to prevent temperature abuse.

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IMPORTANT QUESTIONS TO ASK YOURSELF WHEN YOU RECEIVE A CAR

WHY DID CFIA HAVE TO IDENTIFY THE NON-COMPLIANCE IN THE FIRST PLACE?

WHICH PART OF OUR SYSTEM FAILED TO IDENTIFY IT AND RESPOND TO IT APPROPRIATELY BEFORE CFIA ISSUED THE CAR?

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Problem Description – Component 1

Scope:


1a) What is the non-compliance?

1b) When did the problem occur? Is this the first time the problem has occurred?

1c) Where is the problem located? Does the deficiency affect other areas of the facility or HACCP system? How widespread is the problem?

1d) Who is involved in this problem?

1e) Did the problem affect product?

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Problem Description – Component 1a, b

1a) *What is the non-compliance?*

- The room temperature, where the raw product was being thawed, was above the company's written standard of 21°C.
- The raw product internal temperature was above 4°C.
- The raw material temperature of product tempered in Chill room A was not documented.

1b) *When did the problem occur? Is this the first time the problem has occurred?*


- The events took place on August 15, 2011 at 22:15.
- Chill room A temperature is documented once every shift. No deviations from the written standards were noted for the last three months.
- The plant has never documented raw material temperatures.

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Problem description – Component 1c

1c) *Where is the problem located? Does the deficiency affect other areas of the facility or HACCP system? How widespread is the problem?*

- Only Chill room A is used for tempering/thawing. QA SOP #777-Chill Room A Temperature Control must be reviewed.
- QA SOP #789 for "Tempering of Frozen Product" does not address the tempering of raw material using proper controls.
Note: Tempered raw material is checked regularly by QA and/or Production staff even though this is not documented.

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Problem Description – Component 1d & e

1d) *Who is involved in this problem?*

- QA Supervisors, QA Manager, Production Supervisors, Production Manager

1e) *Did the problem affect product?*

- YES, the raw material was affected by the problem. No finished product was impacted, since the raw material was immediately put on hold.


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Person(s) Responsible for Measures – Component 2

Scope: Identify the **title** of person(s) responsible for the immediate/short term and preventative measures. (must have the knowledge, time, competence, authority to implement).

-Position of responsible person(s)

-Name of responsible person(s)

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Person(s) Responsible for Measures – Component 2


Scope: Identify the **title** of person(s) responsible for the immediate/short term and preventative measures.

- Position of responsible person(s)

QA Supervisor
 Production Supervisor
 Food Safety HACCP Coordinator

- Name of responsible person(s)

Bob Hall
 Manny White
 Joe Smith

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Description of Immediate Short Term Measure(s)
– Component 3 a, b, c

Scope:

3a) Describe the measures taken on **affected or potentially affected product**, animals or other thing(s). (e.g.: put product on hold, immediately do missed check, etc.)

3b) Describe the results of the assessment completed to determine if **other products**, animals or other things were implicated.


3c) Describe the Food Safety Assessment (FSA) **performed or to be performed** on the **affected or potentially affected product** including any disposition of product. Attach separate FSA form if applicable.

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Description of Immediate Short Term Measure(s)
– Component 3

3a) Describe the measures taken on **affected or potentially affected product**, animals or other thing(s).

2 skids [lot number X] were immediately isolated, placed on hold (Hold Tag #100) and at 23:00 moved into Chill Room C at 1°C to lower temperature.


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Description of Immediate Short Term Measure(s)
– Component 3

3b) Describe the results of the assessment completed to determine if **other products**, animals or other things were implicated.

Only 2 skids in Chill Room A at that time.

All raw material that is being thawed in Chill Room A is only used on Lines X & Z. All finished products produced on Lines X and Z undergo microbiological testing for TPC, Coliform and generic E-coli. All results have been found acceptable.


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Description of Immediate Short Term Measure(s)
– Component 3 continued

3c) Describe the Food Safety Assessment (FSA) **performed or to be performed** on the affected **or potentially affected product** including any disposition of product. Attach separate FSA form if applicable.


The affected raw material was moved into Chill Room C at 23:00. Chill Room C is maintained at 1°C. The raw material temperature was at 4°C after 2 hours (1:00 am) [Chill Room C Product Temperature Record](#).

The affected raw material was used on Lines X & Z on August 16. Finished product was held for [microbiological testing for TPC, Coliform and generic E-coli](#). All results have been acceptable. The finished product was released on August 19.

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Description of Immediate Short Term Measure(s)
– Component 3d

3d) Describe the **immediate/short term measures** taken to restore control over the deviation until permanent/preventative measures are planned and implemented, include **position titles** (from Component 2) and the **date for completion** of each activity planned.

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Immediate Short Term Measure(s)
– Component 3d

Immediate / Short term measures	Position titles	Completion Date
1. The internal temperature of the raw material was immediately taken and found to be between 5 and 6°C. Recorded on new form : Chill Room A - Temperature Record .	QA Supervisor	August 15, 2011
2. The raw material was immediately isolated, placed on hold (Hold Tag #100) and at 23:00 moved into Chill Room C.	QA Supervisor	August 15, 2011
3. The raw material was used in the production on August 16, 2011. Finished product [lot #] was held and tested. E-mail sent to Plant Manager, QA Manager, QA Supervisor and Production Supervisors.	Production Manager	August 19, 2011

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
Immediate Short Term Measure(s) – Component 3d

Immediate / Short term measures	Position titles	Completion Date
4. Surface and/or internal temperatures of raw material being thawed between August 16 and August 25 (implementation date of the revised QASOP #789 - Tempering of Frozen Product) will be monitored every 2 hrs. and recorded on pew form : Chill Room A - Temperature Record.	QA Supervisor	August 25, 2011

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Description of Verification of Effectiveness of Immediate/Short Term Measures – Component 3e

3e) Describe the procedures to **verify effectiveness of immediate/short term measures** taken, include **position titles** (from Component 2) and the **date for completion** of each activity planned.

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Verification of Effectiveness of Immediate/Short Term Measures – Component 3e

Procedures to <u>verify effectiveness of immediate / short term measures</u>	Position titles	Completion Date
1. The internal temperature of the raw material was monitored in Chill Room C every 2 hrs. and recorded on Chill Room C - Temperature Record . Chill Room C is maintained at 1°C. The raw material temperature was found to remain between 3 and 4°C.	Production Supervisor	August 16, 2011
2. & 3. Daily reconciliation of the held raw material was completed as per plant Hold & Release procedures QASOP #345 and recorded on the Hold Template .	Production Supervisor	August 16, 2011

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Verification of Effectiveness of Immediate/Short Term Measures – Component 3e

Procedures to verify effectiveness of immediate / short term measures	Position titles	Completion Date
3. Daily reconciliation of the held finished product was completed as per plant Hold & Release procedures QASOP #345 and recorded on the Hold Template issued.	Production Supervisor	August 19, 2011
3. Finished product [lot #] was tested for TPC, Coliforms and generic E-coli. All results have been acceptable as recorded on the Lab Report. The finished product was released on August 19 as per the Release Template.	QA Supervisor	August 19, 2011

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Verification of Effectiveness of Immediate/Short Term Measures – Component 3e


Procedures to verify effectiveness of immediate / short term measures	Position titles	Completion Date
4. <u>New form:</u> Chill Room A - Temperature records are reviewed for accuracy daily (by signing and dating the record) to ensure surface and internal temperatures of raw material being thawed meet the standards.	QA Supervisor	August 25, 2011

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Identification of Root Cause(s) – Component 4

Scope:
This step is **critical to fixing the non-compliance so that it does not re-occur.**

Determine the **root cause(s)** of each non-compliance.

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Identification of Root Cause(s) – Component 4

Non-Compliance (from Component 1a):


- The room temperature, where the raw product was thawed, was above the company's written standard of 21°C.
- The raw product internal temperature was above 4°C.
- The raw material temperature of product tempered in Chill room A was not documented.

Questions

Is there a control in place?
 If yes, would the current monitoring program have identified the issue?
 Why has CFIA found the problem and not the plant?
 Is there anything else? (e.g. Training, ventilation/cooling system)

Root Cause:


- The room temp. monitoring frequency of once per shift is not effective in controlling the Chill Room temperature standards.
- There was no record created to document the raw product temp. results.

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Description of preventative measure(s) and activities planned to verify effectiveness of preventative measure(s) – Components 5 & 6

Component 5
Scope: Describe the **preventative measures** include **position titles** and the **date for completion** of each activity planned.

Component 6
Scope: Describe the **procedure(s) to verify the effectiveness of the preventative measures** include **position titles** and the **date for completion** of each activity planned.


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Description of Preventative Measure(s) – Component 5

Root Cause (from Component 4):


- The room temp. monitoring frequency of once per shift is not effective in controlling the Chill Room temperature standards.
- There was no record created to document the raw product temp. results.

Preventative measures	Position Titles	Completion Date
<ul style="list-style-type: none"> Revise QASOP #777 – Chill Room A Temperature Control to increase the monitoring frequency when product is thawed. Modify the new form, QA #777-1. 	Food Safety HACCP Coordinator	August 22, 2011
<ul style="list-style-type: none"> Train the applicable employees on both the SOP & the modified form. Record the training on the Training Record. 		
<ul style="list-style-type: none"> Maintenance staff to set up an alarm when Chill Room A temperature reaches 20°C during thawing process. 	Maintenance Supervisor	August 25, 2011


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
Description of activities planned to verify effectiveness of preventative measure(s) – Component 6

Procedures to verify effectiveness of preventative measures	Position Titles	Completion Date
A training effectiveness check will be conducted on each trained individual by a quiz and / or an on-site assessment while the individual is following the SOP & form, and will include a document review. The findings will be documented on the original Training Record. Any non-compliance will be addressed by issuing a Deviation Report.	Production Supervisor	August 30, 2011
A test of the Chill Room temperature alarm is conducted to ensure that the alarm is triggered at >20 °C. The results are documented on a work order report.	Maintenance Supervisor	August 30, 2011

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*Verification of HACCP system in CFIA recognized establishments
(other than registered meat establishments)*




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Purpose of the Verification by CFIA

To confirm that the establishment's HACCP system


- is up-to-date
- is designed to effectively control food safety hazards
- meets the FSEP requirements
- is effectively implemented as described
- is supported by the establishment senior management

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Frequency of CFIA Verification


Once every 2 years and whenever the following situations occur.

- submission of new HACCP plans
- follow-up after a food safety recall
- when establishments fail to correct food safety related non-compliance noted during regular CFIA inspection activities

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Duration of Verification

The time period established for completing a verification is approximately 5 days.

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FSEP Verification Tasks

There are 2 verification tasks

Task #1 is used only when new HACCP plans are submitted.


Task #2 is used when:

1. scheduled CFIA verifications are conducted
2. follow-up after a recall is conducted
3. establishments fail to correct food safety related non-compliance noted during regular CFIA inspection activities

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Task #1 – New HACCP Plan

- Instructions on how to assess HACCP plan design
 - Product description
 - Product ingredients and incoming materials
 - Process flow diagram
 - Plant schematic
 - Hazard analysis - CCP determination and other control measures
 - Critical Control Points
 - Process Control if applicable
- Instructions on how to assess implementation
 - Critical Control Points and Process Controls, if applicable


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Task #2

Instructions on how to assess HACCP **system** design and implementation


The scope must at least include:

- The senior management letter of commitment
- The HACCP system performance reporting
- The maintenance and reassessment procedures
- One (1) selected HACCP plan
- Six (6) selected prerequisite program sub-elements

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Task #2 – Selection of HACCP Plan and Prerequisite Programs


Based on CFIA compliance documentation and situations that have occurred at the establishment that should have resulted in an update and/or reassessment of parts of the HACCP system

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Task #2 – Selection of HACCP Plan and Prerequisite Programs

CFIA Compliance Data


- Inspection reports and related actions plans
- Consumer complaints investigated by the CFIA
- CFIA sample results and related action plans
- Detention and other enforcement issues or actions

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Task #2 – Selection of HACCP Plan and Prerequisite Programs

List of triggers for HACCP system reassessment

- New ingredients that contain an allergen
- Unsatisfactory laboratory results
- Consumer/client complaint
- Food safety recall
- New technology or piece of equipment
- Change made in product description (shelf life, labelling instructions, etc.)
- Change made in production volume
- Non-compliance identified during CFIA inspection
- Etc.

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Task #2 – Selection of HACCP Plan

HACCP Plan(s) affected by changes or compliance issues


- CFIA will select the corresponding HACCP plan

CCP and/or PC affected by changes or compliance issues in other HACCP plan(s) than the one selected

- CFIA will add the CCP and/or PC to the scope

No HACCP plan affected by changes or compliance issues


- CFIA will randomly select one HACCP plan (higher risk to human health)

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Task #2 – Selection of Prerequisite Programs

CFIA will select sub-elements(s) affected by changes or compliance issues


If there are less than 6 sub-elements affected by changes or compliance issues, CFIA will select additional sub-elements to reach a total of 6

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Compliance Level

Based on the information gathered, the CFIA team assigns a level of compliance to the task they complete:


“A” Acceptable level of compliance
“U” Unacceptable level of compliance

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Acceptable Level of Compliance (A)


The level of compliance is acceptable when the information collected demonstrates that the HACCP system:

- meets the FSEP requirements
- is designed to effectively control food safety hazards
- is effectively implemented as described
- is supported by Senior Management

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Acceptable Level of Compliance (A)


- The CFIA team may identify minor items that have no impact on food safety and/or do not compromise the intent of the FSEP requirements
- Documentation of these items is required if there is an added value

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Unacceptable Level of Compliance (U)

The level of compliance is unacceptable when the information collected demonstrates that the HACCP system:


- does not meet the FSEP requirements
- is not designed to effectively control food safety hazards
- is not effectively implemented as described
- is not supported by Senior Management

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Results of the verification is communicated to the operator through 2 documents

The FSEP Verification Report (Task rated A)

The Corrective Action Request (Task rated U)


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Corrective Action Request (CAR)

The CAR identifies the non-compliance and requires the operator to implement corrective measures by:

- Providing an acceptable action plan by a specified date
- Effectively implementing the corrective and preventative measures as described in the action plan by a specified date

The CAR also describes the information gathered during the follow-up verification conducted by CFIA after the date for completion of corrective measures specified on the CAR


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Request for Review of a CAR

An Operator may request a review of a CAR before the date specified for the submission of an action plan

The Operator must submit the reason for the request in writing to the Area FSEP Coordinator


A written decision is forwarded back to the Operator

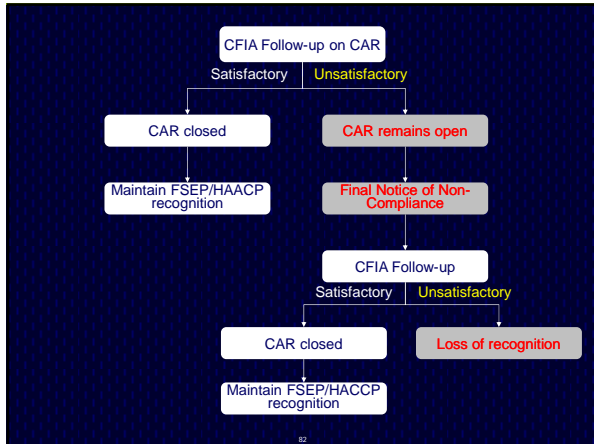
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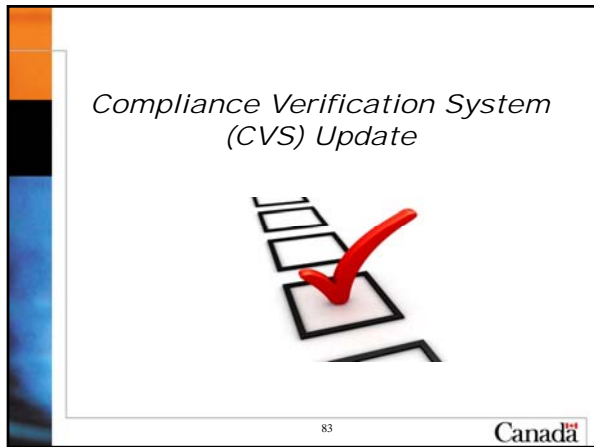
Action Plan Extension

Is provided when:

- Food safety is not compromised
- The establishment will not meet the specified date for completion of corrective actions due to reasons beyond its control
- The establishment submits a written request for an extension before the specified date for completion of the action plan
- The written request includes the reason for the extension request and the proposed new completion date

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ROLES AND RESPONSIBILITIES

As a licensed operator of a registered establishment you must:

- Ensure your company and/or your product complies with the laws of Canada
- Take effective action when issues of non-compliance occur


CFIA must:

- Assess your compliance to the Meat Inspection Act and Regulations and other applicable legislation
- Take enforcement action when there are reasonable grounds to do so

What is CVS?


CVS is a tool that provides a consistent approach to

1. Conducting inspection activities
 - Meat Hygiene Manual of Procedures Chapter 18, Verification tasks
2. Documenting inspection activities
 - Verification report, Corrective Action Request
3. Reporting on inspection activities
 - CVS Performance Data Reports

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CVS Performance Data Reports

- Generated each quarter
- Distributed to National, Area and Regional Management
- Used to identify:
 - Trends
 - Resource issues
 - History of compliance
 - High risk inspection activities
 - Program delivery issues
 - CVS documentation issues


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CVS Maintenance

Whenever a change or a situation occurs that could affect the CVS Tasks or Chapter 18, the CFIA reviews and updates the affected Tasks or Chapter 18 sections.

Changes or situations may include:

- New or amended regulatory requirements
- Risk based strategy results
- New CFIA actions to be implemented
- CFIA inspectors or Industry concerns related to the tasks or Chapter 18 guidance

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New or Amended Requirements

Revision of the Meat Inspection Regulations

1. To repeal certain obsolete and redundant requirements
2. To streamline provision/requirements
3. To convert prescriptive requirements, namely requirements that specify how an outcome must be achieved, where possible, to outcome based requirements
4. To ensure consistency in terminology with other CFIA administrated Regulations
5. To amend incorrect terminology
6. To increase alignment with regulations and policies of Canada's major trading partners including the United States and the European Union

List of amendments can be found in Canada Gazette Part II, Vol 145, No23

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CVS Update vs New or Amended Requirements

Example of Tasks affected by regulatory or policy changes:

- 1.2.01 (Outside property)
- 1.2.36 (Building Design and Construction)
- 1.2.38 (Allergen Control Program)

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Risk Based Strategy

The Risk Based Strategy determines CVS task frequency using 6 risk elements:

1. Historical – Industry non-compliance data
2. Listeria control results
3. HACCP system design task results
4. Forecasting activities
5. Foreign audit findings
6. Overall impact of each task on food activity

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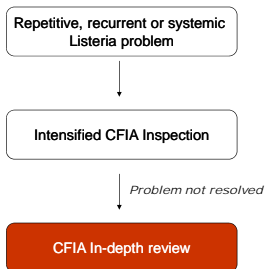
CVS Update vs Risk Based Strategy Results

The verification frequency was lowered due to improved industry compliance for the following verification tasks:

- 1.1.11 (Formulation)
- 1.1.12 (Foreign metal detection)
- 1.2.11 (Poultry slaughter – Application of water spray)
- 1.2.15 (Poultry slaughter – Ante mortem screening)

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CFIA action to be integrated into CVS



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CVS Update vs In-Depth Review

Task 4.2.01

- Goal: FIND THE ROOT CAUSE
- Task instructions focus on on-site verification and HACCP system assessment

Chapter 18, subsection 18.7.1.3

- Who should be part of the CFIA team
- Steps prior the in-depth review
- How to report results to operator
 - Task 4.2.01 is rated U
 - All relevant information will be noted on an Inspection Report-Corrective Action request

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CVS Update vs Industry Concerns

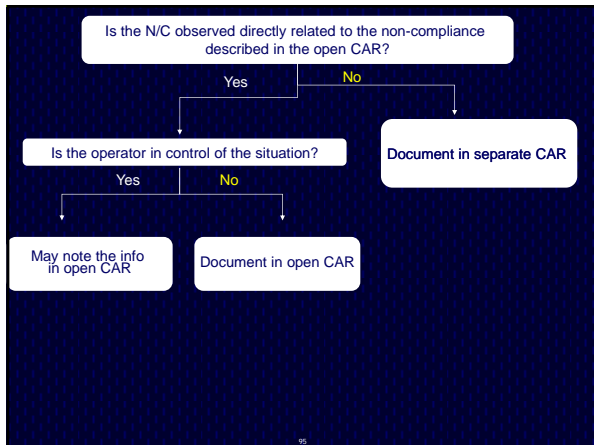
Concern #1

- Inspectors identified deficiencies on open CAR that were not related to the non-compliance identified in the open CAR

CVS Update

- Chapter 18.7.2.3 – Identifying non-compliance that is related to an open CAR

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CVS Update vs Industry Concerns

Concern #2

- Difficult to close a CAR. During follow-up activities, inspectors identified deficiencies that were not related to the non-compliance identified in the CAR.

CVS update


- Chapter 18.7.6.2 – Follow-up on non-compliance identified on the CAR

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New Updated CVS Establishment Profile

Current Situation


- Information on federally registered meat and poultry establishments is frequently needed by the CFIA for:
 - ✓ resource exercises
 - ✓ risk management exercises
 - ✓ risk based sampling purposes
 - ✓ media requests
 - ✓ foreign country requests (i.e. FSIS's SRT)
 - ✓ etc...
- The same information is often requested several times a year by different groups and for different projects.

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New Updated CVS Establishment Profile

Solution


- The "*CVS Establishment Profile*" will be modified to become one extensive questionnaire/survey sent to inspection staff for each federally registered meat and poultry establishment once-a-year or when additional information is needed.
- All information will be captured in one secure central database (CVS database).
- Launch date: April 2012

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New Updated CVS Establishment Profile

Type of information that will be generated from the CVS database:

- How many plants in Canada are RTE and process dry cured products?
- How many plants grind beef?
- How many plants use well water?
- How many plants use aseptic packaging?
- How many federally registered meat and poultry establishments also process fish or eggs or dairy?
- How many plants process products under Risk Category 1, 2A and 2B?
- Etc.

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Seasonal/Intermittent Operations

- In response to the number of establishments that operate on an infrequent basis, guidance was developed to provide a consistent and realistic approach to conducting CVS tasks at these operations.
- The guidance consists of a questionnaire that is to be completed by the local staff and then communicated to the National Inspection Division (NID) for review.
- NID will determine the appropriate number and frequency of CVS tasks to be conducted for the period of operation.

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Canada

Foreign Country Audit

- A new protocol is currently being developed to standardize the Agency's approach towards foreign audits.
- The protocol is to ensure foreign audits are planned and implemented consistently. The protocol will provide guidance regarding:
 - Audit logistics planning communication
 - Pre audit inspection activities
 - Post audit activities
 - Communicating / coordinating follow up activities in a timely manner

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Canada

Health Canada – Validation Guidelines

- Health Canada's "Policy on *Listeria monocytogenes* in Ready-to-Eat Foods - 2010" defines two risk categories for ready to eat meat and poultry products. In order to be classified into a risk category that permits a lower sampling and testing frequency, operators must provide validation data that proves that pathogenic bacteria is controlled throughout the product shelf life.
- Operators of federally registered establishments are encouraged to wait for the Health Canada validation guidelines and related tools to be published to ensure their validation studies are completed correctly and contain all necessary information.

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Canada

Health Canada – Validation Guidelines

Interim procedures for Meat Program submissions

- Although the HC Guidelines have not yet been released, some operators may wish to submit documentation packages to the Meat Programs Division (MPD) for review and approval.
- These submissions are to be forwarded through your responsible inspector.
- All submissions will be reviewed by MPD with the CFIA Food Safety Division.

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Canada

5 Most Common Tasks Rated U



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Canada

5 Most Common Tasks Rated U

	Task #	Title
1.	4.1.04	HACCP System Design
2.	1.2.14	Storage
3.	1.2.04 & 1.2.41	Ventilation (non RTE & RTE)
4.	1.1.08 & 1.1.10	CCP Generic & CCP Cooling
5.	1.2.45	General Food Hygiene

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Canada

Exercise Instructions

Each table is assigned a number

Each table number is associated with one task

Table #	Task #	Title
1.	4.1.04	HACCP System Design
2.	1.2.14	Storage
3.	1.2.04 & 1.2.41	Ventilation (non RTE & RTE)
4.	1.1.08 & 1.1.10	CCP Generic & CCP Cooling
5.	1.2.45	General Food Hygiene

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Exercise Instructions

- A copy of each task is in your binder – tab 6
- Read the task
- Answer these questions
 - What are the most common deficiencies associated with the task?
 - What are the most common causes?
 - How do you correct these deficiencies
 - Short term
 - Long term
- Identify a spokesperson

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Questions & Answers



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